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**Mining
Form
MR-1300**

**S.C. DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
BUREAU OF LAND AND WASTE MANAGEMENT
DIVISION OF MINING AND SOLID WASTE PERMITTING
2600 Bull Street, Columbia, SC 29201
Telephone Number: (803) 896-4261 Fax Number: (803) 896-4001**

APPLICATION FOR MODIFYING A MINE OPERATING PERMIT AND/OR RECLAMATION PLAN

Name of Mine: Richardson Mine Permit Number: I-001765
Name of Company: American Materials Company of SC, LLC County: Marion
Home Office Address: 1631 Oleander Dr, Wilmington NC 28403-0000
(Street or P.O. Box) (City) (State) (Zip)
Telephone: (910) 799-1411
Mine Office Address: 8000 Stafford Place, Gresham SC 29546-0000
(Street or P.O. Box) (City) (State) (Zip)
Telephone: (843) 362-1555
Location of Mine: US Hwy 378 & Stafford Pl. Britton's Neck
(State or County Highway) (nearest town or city)

REASONS FOR REQUESTING MODIFICATIONS

Change in the Land Use for Which Affected Land Will Be Reclaimed

Segment or Area: _____ From: _____ To: _____
Describe: _____

Change in Reclamation Practices:

Segment or Area: _____ From: _____ To: _____
Describe: _____

Change in Schedule of Reclamation

Segment or Area: _____ From: _____ To: _____
Describe: _____

Increase Land Area (attach new map)

Segment or Area: 3.8 Acres From: _____ To: _____
Describe: Area adjacent to existing plant site on east side. **see attached map**

Decrease Land Area (attach new map)

Segment or Area: 2 Acres From: _____ To: _____
Describe: New powerline area in hay field to woodline. **see attached map**

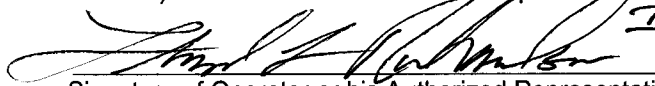
RECEIVED

SEP 29 2008

Other

Describe: _____

I hereby request modification of the above permit and/or reclamation plan and certify that the information originally submitted on the application has not changed (except as provided herein above) and that this mine is now in compliance with the South Carolina Mining Act.



Signature of Operator or his Authorized Representative

Member

Title

September 29, 2008

Date

_____ as surety, hereby consents to the above referenced modification and acknowledges and agrees that its bond shall remain in effect in the event the modification is approved (CONSENT TO BE OBTAINED BY OPERATOR).

ATTEST:

Principal (L.S.)

BY: _____ (L.S.)
Secretary or Assistant Secretary

(Affix Corporate Seal if applicable)

Title (L.S.)

Surety (L.S.)

Licensed South Carolina Agent

Attorney-in-fact (L.S.)

Approved: _____

Date: _____